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Division of Corporations

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Florida Department of State
Division of Corporations
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Division of Corporations
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From:
Account Name : LATHAM, SHUKER, EDEN & BEAUDINE, LLP
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**FLORIDA LIMITED LIABILITY CO.
LAKELAND INDUSTRIAL PARK II, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

N. SAMS
AUG 31 2017

Electronic Filing Menu

Corporate Filing Menu

Help

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

LAKELAND INDUSTRIAL PARK II, LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:7380 W. SANDLAKE RD. STE. 500
ORLANDO, FLORIDA 32819Mailing Address:7380 W. SANDLAKE RD. STE. 500
ORLANDO, FLORIDA 32819

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

LSEB AGENT SERVICES, INC.

Name

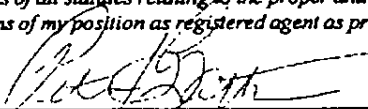
111 N. MAGNOLIA AVE., STE. 1400Florida street address (P.O. Box NOT acceptable)ORLANDO FLORIDA 32801

City

State

Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

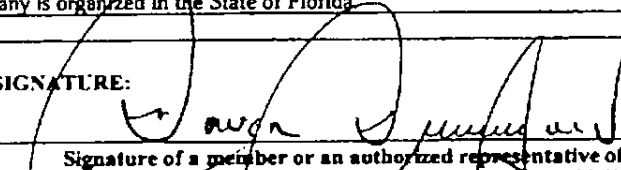
"MGR" = Manager

MANAGER**Name and Address:**DOWER DRUMMOND7380 W. SANDLAKE RD, STE. 500ORLANDO, FLORIDA 32819

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.**ARTICLE VI:** Other provisions, if any.The purpose of LAKELAND INDUSTRIAL PARK II, LLC is to engage in any lawful activity for which a
Limited Liability Company is organized in the State of Florida.**REQUIRED SIGNATURE:**

 Signature of a member or an authorized representative of a member.
 This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
 I am aware that any false information submitted in a document to the Department of State
 constitutes a third degree felony as provided for in s.817.155, F.S.
DOWER DRUMMOND

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

 DEPARTMENT OF STATE
 TALLAHASSEE, FLORIDA

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